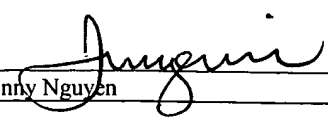


2635
41

CERTIFICATE OF MAIL

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on September 10, 2004.


Jinny Nguyen

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: September 10, 2004

Richard H. HARRIS

Confirmation No.: 3546

Serial No.: 10/002,752

Group Art Unit: 2635

Filed: October 31, 2001

Examiner: Au, Scott D.

For: SECURE SMART CARD

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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SEP 16 2004
Technology Center 2600

AMENDMENT

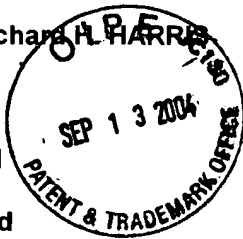
Sir:

In response to the Office Action dated June 17, 2004, please amend the above-identified application in the following manner:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

TRANSMITTAL FORM

Attorney Docket No.
RPS920010068US1/2192PIn re the application: **Richard L. Harris**Confirmation No: **3546**Serial No: **10/002,752**Group Art Unit: **2635**Filed: **October 31, 2001**Examiner: **Au, Scott D.**For: **Secure Smart Card**

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Notice of Appeal
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Brief (in triplicate)
<input type="checkbox"/>	Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer	RECEIVED SEP 16 2004 Technology Center 2600	
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from to .			
<input type="checkbox"/>	Executed Declaration by Inventor(s)				

CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	14	20	0	\$18.00	\$ 0.00
Independent Claims	4	6	0	\$86.00	\$ 0.00
				Total Fees	\$ 0.00

METHOD OF PAYMENT

<input type="checkbox"/>	Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. 02-2120 (Sawyer Law Group LLP).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Joseph A. Sawyer, Jr., Reg. No. 30,801
Signature	
Date	September 10, 2004

CERTIFICATE OF MAILING

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Type or printed name	Jinny Nguyen
Signature	